

DOCUMENT # 273588

1. Entity Name
MORGAN ELECTRIC COMPANY, INC.


Principal Place of Business
1238 CRATE DRIVE
P O BOX 20028
TALLAHASSEE FL 32316
US

Mailing Address
1238 CRATE DRIVE
P O BOX 20028
TALLAHASSEE FL 32316
US

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country

FILED
Jan 11, 2001 8:00 am
Secretary of State
01-11-2001 90015 015 ***158.75



4. FEI Number **59-1022878** Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
MORGAN, PAUL H. JR.
1238 CRATE DRIVE
TALLAHASSEE FL 32304

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS	
TITLE	<input type="checkbox"/> Delete
NAME	PD
STREET ADDRESS	MORGAN, PAUL H. JR.
CITY-ST-ZIP	1238 CRATE DR.
	TALLAHASSEE FL
TITLE	<input type="checkbox"/> Delete
NAME	VP
STREET ADDRESS	INGRAM, WALTER W. JR
CITY-ST-ZIP	1238 CRATE DR.
	TALLAHASSEE FL
TITLE	<input type="checkbox"/> Delete
NAME	STD
STREET ADDRESS	MORGAN, PAUL III
CITY-ST-ZIP	1238 CRATE DR.
	TALLAHASSEE FL
TITLE	<input type="checkbox"/> Delete
NAME	VP
STREET ADDRESS	BROWN, ROY B.
CITY-ST-ZIP	1238 CRATE DRIVE
	TALLAHASSEE FL
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Paul H. Morgan, Jr. **PAUL H. MORGAN, JR.** 1-3-01 850-576-8181
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)